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## APPLICANTS

Robert C. Taft, Munich, GERMANY;

Christopher A. Menkus, Munich, GERMANY;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/544,660 02/13/2004 *yes, j*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *no, j*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 6	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>			
Verified and Acknowledged			23	4

## ADDRESS

38845  
 DARBY & DARBY P.C.  
 P.O. BOX 5257  
 NEW YORK, NY  
 10150-5257

## TITLE

ADC linearity improvement

FILING FEE  RECEIVED 1014	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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